Fill in this info	rmation to identify your	case:		
Debtor 1	John Brian Ber			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI	
Case number	19-50859			
(if known)				Check if this is an amended filing

#### Official Form 106Sum

#### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	165,000.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	72,952.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	237,952.00
Pai	t 2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	165,790.52
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	48,030.75
	Your total liabilities	\$	213,821.27
Paı	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	6,705.77
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,452.00
⊃aı	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other s	chedules.
	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

#### 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 2 of 51

Debtor 1 John Brian Bergeron Case number (if known) 19-50859

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_9,539.46

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	42,082.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	42,082.00

Fill in this inform	nation to identify v	our case and th	nis filina	i.			
Debtor 1	John Brian First Name		Name	Last Name			
Debtor 2	. not riamo	····adic	- ramo	<u> </u>			
(Spouse, if filing)	First Name	Middle	Name	Last Name			
United States Ban	kruptcy Court for t	he: SOUTHER	N DISTF	RICT OF MISSISSIPPI			
Case number _1	9-50859						☐ Check if this is an
							amended filing
Official For <b>Schedul</b> e		onerty					40/45
Scriedule	AVD. FI	operty					12/15
No. Go to Part :  ■ Yes. Where is	2. the property?	itable interest in a		ence, building, land, or similar property?  is the property? Check all that apply			
409 Park				Single-family home	Do not ded	uct secured cla	aims or exemptions. Put
Street address, if	available, or other descr	ription		Duplex or multi-unit building Condominium or cooperative			d claims on Schedule D: ns Secured by Property.
Tifton	GA	31794-000 0		Manufactured or mobile home Land	Current va		Current value of the portion you own?
City	State	ZIP Code		Investment property	\$165	,000.00	\$165,000.00
				Timeshare Other			our ownership interest ancy by the entireties, or
			Who I	has an interest in the property? Check one	a life estat	e), if known.	ariey by the chareacs, or
				Debtor 1 only	Fee sir	nple	
Tift				Debtor 2 only			
County				Debtor 1 and Debtor 2 only  At least one of the debtors and another		t if this is com	munity property
			Other	r information you wish to add about this iter erty identification number:	,	,	
2. Add the dolla	ır value of the por	tion you own fo	or all of v	your entries from Part 1, including any	entries for		
	ive attached for P			r here		=>	\$165,000.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Yes				
1 Make		Who has an interest in the property? Check one		ed claims on Schedule D:
Mode Year	2014	■ Debtor 1 only □ Debtor 2 only	Current value of the	Current value of the
Othe	er information:	☐ Debtor 1 and Debtor 2 only☐ At least one of the debtors and another	entire property?	portion you own?
	d in Wife's Chapter 13 n-Case No.: 17-70275	Check if this is community property (see instructions)	\$4,487.00	\$4,487.0
2 Make		Who has an interest in the property? Check one	the amount of any secure	laims or exemptions. Put ed claims on Schedule D:
Mode Year	<del></del>	■ Debtor 1 only □ Debtor 2 only	Current value of the	ims Secured by Property.  Current value of the
Othe	roximate mileage:er information:	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	entire property?	portion you own?
Wif	ven by Wife-Paid in e's Chapter 13 n-Case No.: 17-70275	☐ Check if this is community property (see instructions)	\$8,747.00	\$8,747.0
3 Make		Who has an interest in the property? Check one	the amount of any secure	laims or exemptions. Put
Mode Year		■ Debtor 1 only □ Debtor 2 only	Current value of the	ims Secured by Property.  Current value of the
Appr	roximate mileage: 97041	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	er information:	☐ At least one of the debtors and another		
Othe dri in Pla	ven by daughter-Paid Wife's Chapter 13 n-Case No.: 17-70275	☐ Check if this is community property (see instructions)	\$5,526.00	\$5,526.0
Other dri in Pla  Watercricxamples  No Yes  Add the pages y	wen by daughter-Paid Wife's Chapter 13 In-Case No.: 17-70275  aft, aircraft, motor homes, ATVs at as: Boats, trailers, motors, personal was dollar value of the portion you over you have attached for Part 2. Write	Check if this is community property (see instructions)  and other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft attercraft attercraft attercraft.	d accessories accessories ay entries for	\$5,526.00 \$18,760.00 Current value of the portion you own?
Other dri in Pla  Vatercrixamples  I No I Yes  Add the pages y  I S: Des	wen by daughter-Paid Wife's Chapter 13 In-Case No.: 17-70275  aft, aircraft, motor homes, ATVs at as: Boats, trailers, motors, personal was dollar value of the portion you over you have attached for Part 2. Write	Check if this is community property (see instructions)  and other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including and that number here	d accessories accessories ay entries for	\$18,760.00
Other drii in Pla  Natercrixample: No Yes  Add the pages y  t 3: Des you ow  Househe Example:	ven by daughter-Paid Wife's Chapter 13 In-Case No.: 17-70275  aft, aircraft, motor homes, ATVs arts: Boats, trailers, motors, personal way ou have attached for Part 2. Write scribe Your Personal and Household in or have any legal or equitable in old goods and furnishings	Check if this is community property (see instructions)  and other recreational vehicles, other vehicles, and attercraft, fishing vessels, snowmobiles, motorcycle attercraft of your entries from Part 2, including and that number here	d accessories accessories ay entries for	\$18,760.00  Current value of the portion you own?  Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

#### 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 5 of 51

Deb	tor1 John Bria	n Bergeron Case number (if	known)	19-50859
E		and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; Il phones, cameras, media players, games	music c	ollections; electronic devices
-	Tes. Describe			
		TV and Ipad		\$500.00
<i>E</i>		d figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stam tions, memorabilia, collectibles	ıp, coin,	or baseball card collections;
		Art		\$1,000.00
10. <b>I</b>	No Yes. Describe	es, shotguns, ammunition, and related equipment elothes, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe			
		everyday clothes		\$1,000.00
	<b>Jewelry</b> <i>Examples:</i> Everyday joan in the second of the	ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, rings, earings and other misc jewelry	gems, g	old, silver \$3,000.00
14. <i>I</i>	Non-farm animals  Examples: Dogs, cats  No Yes. Describe  Any other personal and No Yes. Give specific in	nd household items you did not already list, including any health aids you did no	t list	
15.		of all of your entries from Part 3, including any entries for pages you have attacl number here	ned	\$9,000.00
Part	4: Describe Your Fina	ncial Assets		

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

#### 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 6 of 51

Debtor 1 John	n Brian Bergeron	Case number (if known)	19-50859
16. <b>Cash</b> Examples: Mo  □ No	oney you have in your wallet, in your h	ome, in a safe deposit box, and on hand when you file your petition	on
— 163		Cash	\$150.00
		ounts; certificates of deposit; shares in credit unions, brokerage h s with the same institution, list each.	nouses, and other similar
□ No			
■ Yes		Institution name:	
	17.1. Checking	CBC	\$42.00
		okerage firms, money market accounts	
joint venture	traded stock and interests in incorp	orated and unincorporated businesses, including an interes	t in an LLC, partnership, and
■ No □ Yes. Give s	pecific information about them Name of entity:	 % of ownership:	
Negotiable ins Non-negotiable ■ No	struments include personal checks, ca	otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them.	
	pension accounts erests in IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing	plans
Yes. List each	ch account separately.  Type of account:	Institution name:	
	401(k)	Diocese of New Orleans	\$5,000.00
	401(k)-Spouse	Tift REgional Medical Center	\$40,000.00
Your share of		o that you may continue service or use from a company public utilities (electric, gas, water), telecommunications compar	nies, or others
☐ Yes		Institution name or individual:	
`	contract for a periodic payment of mon	ey to you, either for life or for a number of years)	
■ No □ Yes	Issuer name and description.		
26 U.S.C. §§ 53	education IRA, in an account in a c 30(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tuition pro	ogram.
■ No □ Yes	Institution name and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	
25. Trusts, equita ■ No	ble or future interests in property (	other than anything listed in line 1), and rights or powers exe	rcisable for your benefit

Official Form 106A/B Schedule A/B: Property page 4

Deb	tor 1	John Brian Bergeron	Case number (if known)	19-50859
	Yes.	Give specific information about them		
_		s, copyrights, trademarks, trade secrets, and other intellectual poles: Internet domain names, websites, proceeds from royalties and		
		Give specific information about them		
_		es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative association ho	oldings, liquor licenses, professional license	es
		Give specific information about them		
Mor	ney or	property owed to you?		Current value of the portion you own?  Do not deduct secured claims or exemptions.
_	Γax ref I <sub>No</sub>	funds owed to you		
		Give specific information about them, including whether you already	filed the returns and the tax years	
•	Examp I No	support  bles: Past due or lump sum alimony, spousal support, child support,  Give specific information	maintenance, divorce settlement, property	settlement
	Examp	amounts someone owes you  bles: Unpaid wages, disability insurance payments, disability benefits benefits; unpaid loans you made to someone else  Give specific information	s, sick pay, vacation pay, workers' compen	sation, Social Security
		ets in insurance policies		
	Examp ■ No	oles: Health, disability, or life insurance; health savings account (HS/	A); credit, homeowner's, or renter's insuran	ce
_		Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
	If you a someo No	terest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance has died.  Give specific information	ance policy, or are currently entitled to rece	ive property because
	<i>Examp</i> ■ No	s against third parties, whether or not you have filed a lawsuit or ples: Accidents, employment disputes, insurance claims, or rights to		
		Describe each claim  contingent and unliquidated claims of every nature, including co	ountaralaims of the debter and rights to	set off claims
ı	No	Describe each claim	ounterclaims of the debtor and rights to	set on claims
_		nancial assets you did not already list		
	No Yes.	Give specific information		
36.	Add t	the dollar value of all of your entries from Part 4, including any eart 4. Write that number here	entries for pages you have attached	\$45,192.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Official Form 106A/B Schedule A/B: Property

#### 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 8 of 51

Deb	tor1 _John Brian Bergeron		Case number (if known)	19-50859
	o you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You lf you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. <b>I</b>	Oo you own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No. Go to Part 7.			
	☐ Yes. Go to line 47.			
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
53. I	Do you have other property of any kind you did not already list	?		
	Examples: Season tickets, country club membership  No			
	No Yes. Give specific information			
_	Tes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
1 ait	c. List the rotals of Each raft of this roth			
55.	Part 1: Total real estate, line 2			\$165,000.00
	Part 2: Total vehicles, line 5	\$18,760.00		
	Part 3: Total personal and household items, line 15	\$9,000.00		
	Part 4: Total financial assets, line 36	\$45,192.00		
	Part 5: Total business-related property, line 45	\$0.00		
	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	<u>\$72,952.00</u>	Copy personal property to	otal \$72,952.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$237,952.00

Official Form 106A/B Schedule A/B: Property page 6

Fill in this information to identify your case:					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number _	19-50859				☐ Check if this is an
,					amended filing

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Check only one box for each exemption.		
House hold furniture and appliances	\$3,500.00	\$3,500.00	Miss. Code Ann. § 85-3-1(a)	
Line from Schedule A/B: 6.1		☐ 100% of fair market value, up to any applicable statutory limit		
TV and Ipad Line from Schedule A/B: 7.1	\$500.00	\$500.00	Miss. Code Ann. § 85-3-1(a)	
		□ 100% of fair market value, up to any applicable statutory limit		
Art Line from <i>Schedule A/B</i> : 8.1	\$1,000.00	\$1,000.00	Miss. Code Ann. § 85-3-1(a)	
		☐ 100% of fair market value, up to any applicable statutory limit		
everyday clothes Line from <i>Schedule A/B</i> : 11.1	\$1,000.00	\$1,000.00	Miss. Code Ann. § 85-3-1(a)	
		☐ 100% of fair market value, up to any applicable statutory limit		
rings, earings and other misc jewelry	\$3,000.00	\$3,000.00	Miss. Code Ann. § 85-3-1(a)	
Line from Schedule A/B: 12.1		100% of fair market value, up to any applicable statutory limit		

#### 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 10 of 51

Debto	or1 John Brian Bergeron		Case number (if known) 19-50859
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Specific laws that allow exemption
		Copy the value from Schedule A/B	Check only one box for each exemption.
	401(k): Diocese of New Orleans	\$5,000.00	\$5,000.00 Miss. Code Ann. § 85-3-1(e)
L	ine from <i>Schedule A/B</i> : 21 . 1		100% of fair market value, up to any applicable statutory limit
	401(k)-Spouse: Tift REgional Medical Center	\$40,000.00	\$40,000.00 Miss. Code Ann. \$ 85-3-1(e)
L	ine from Schedule A/B: 21,2		□ 100% of fair market value, up to any applicable statutory limit
_	State Income Tax Refund	Unknown	\$5,000.00 Miss. Code Ann. \$ 85-3-1(k)
			100% of fair market value, up to any applicable statutory limit
	Federal Income Tax Refund Line from Schedule A/B:	Unknown	\$5,000.00 Miss. Code Ann. \$ 85-3-1(j)
			□ 100% of fair market value, up to any applicable statutory limit
	Earned Income Tax Credit Line from Schedule A/B:	Unknown	\$5,000.00 Miss. Code Ann. \$ 85-3-1(i)
			□ 100% of fair market value, up to any applicable statutory limit
			0? ses filed on or after the date of adjustment.)
	■ No		
	_ , , , , , ,	ered by the exemption wi	thin 1,215 days before you filed this case?
	□ No		
	☐ Yes		

Filli	in this information to identify yo	ur case:			
Deb	tor1 John Brian E	Bergeron			
	First Name	Middle Name Last Name			
	tor 2 use if, filing) First Name	Middle Name Last Name			
Unit	ed States Bankruptcy Court for the	E: SOUTHERN DISTRICT OF MISSISSIPPI			
Cas	e number 19-50859				
(if kno				☐ Check	if this is an
				amend	ded filing
~ ···					
Offi	cial Form 106D				
Sc	hedule D: Creditors	s Who Have Claims Secured	by Propert	У	12/15
		If two married people are filing together, both are equ out, number the entries, and attach it to this form. On			
	per (if known).	out, number the charles, and attach it to the forms on	the top of any addition	nai pagoo, irrito your na	mo una caco
1. Do	any creditors have claims secured b	by your property?			
ı	☐ No. Check this box and submit	this form to the court with your other schedules. Yo	u have nothing else t	o report on this form.	
-	Yes. Fill in all of the information	below.			
Part	1: List All Secured Claims				
		more than one secured claim, list the creditor separately	Column A	Column B	Column C
		is a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much	n as possible, list the claims in alphabet	tical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	ALLY FINANCIAL	Describe the property that secures the claim:	\$0.00	\$8,747.00	\$0.00
	Creditor's Name	2014 Jeep Compas	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	
		Driven by Wife-Paid in			
		Wife's Chapter 13 Plan-Case			
	PO BOX 380901	As of the date you file, the claim is: Check all that			
	Minneapolis, MN	apply.			
	55438	Contingent			
	Number, Street, City, State & Zip Code	Unliquidated			
Who	owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
_		☐ An agreement you made (such as mortgage or secu	ırad		
_	Debtor 1 only	car loan)	ii Cu		
_	ebtor 2 only bebtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	t least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
_	Check if this claim relates to a	☐ Other (including a right to offset)			
_ (	meen ii iiiis ciaiiii leidles lu d	- Other (including a right to offset)			

community debt

Date debt was incurred

Last 4 digits of account number

Debtor 1 John Brian Bergeron	n	Case number (if known)	19-50859	
First Name Middle N	lame Last Name			
2.2 ALLY FINANCIAL	Describe the property that secures the claim:	\$0.00	\$5,526.00	\$0.00
Creditor's Name	2013 Chysler 200 97041 miles driven by daughter-Paid in Wife's Chapter 13 Plan-Case No.: 17-70275	70,00	+0,000000	70100
PO BOX 380901 Minneapolis, MN 55438	As of the date you file, the claim is: Check all that apply.	J		
Number, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 Ameris Bank	Describe the property that secures the claim:	\$50,000.00	\$165,000.00	\$790.52
Creditor's Name	409 Park Ave. N. Tifton, GA 31794 Tift County			
735 2nd Street Tifton, GA 31794	As of the date you file, the claim is: Check all that apply.  Contingent	1		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.4 Caliber Home Loans	Describe the property that secures the claim:	\$115,790.52	\$165,000.00	\$0.00
Creditor's Name	409 Park Ave. N. Tifton, GA 31794 Tift County			
P.O. Box 24610 Oklahoma City, OK 73124	As of the date you file, the claim is: Check all that apply.  Contingent	J		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt		Mortgage		
Date debt was incurred	Last 4 digits of account number 905	5		

#### 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 13 of 51

Debtor 1 John Brian Bergeror	1	Case number (if known) 19-50859						
First Name Middle N	ame Last Name							
2.5 FORD MOTOR CREDIT	Describe the property that secures the claim:	\$0.00	\$4,487.00	\$0.00				
Creditor's Name	2014 Ford Focus Paid in Wife's Chapter 13 Plan-Case No.: 17-70275							
PO BOX 689007 Franklin, TN 37068	As of the date you file, the claim is: Check all that apply.  □ Contingent							
Number, Street, City, State & Zip Code	Unliquidated							
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.							
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or car loan)	secured						
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien	)						
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit							
☐ Check if this claim relates to a community debt	Other (including a right to offset)							
Date debt was incurred	Last 4 digits of account number							
If this is the last page of your form, add	olumn A on this page. Write that number here: the dollar value totals from all pages.	\$165,790. \$165,790.						
Write that number here:		\$105,790.	32					
Part 2: List Others to Be Notified for	r a Debt That You Already Listed							
trying to collect from you for a debt you o	e notified about your bankruptcy for a debt that we to someone else, list the creditor in Part 1, ar t you listed in Part 1, list the additional creditors iis page.	nd then list the collection age	ncy here. Similarly, if you l	have more				
Name, Number, Street, City, State & Barrett Daffin Frappie		which line in Part 1 did you ente	er the creditor? 2.4					
4004 Belt Line Road Suite 100 Addison, TX 75001		t 4 digits of account number						

FIII IN	tnis into	rmation to identify your	case:			
Debto	or 1	John Brian Ber				
<b>5</b> 1 <i>i</i>	•	First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	First Name	Middle Name	Last Name		
		Bankruptcy Court for the:	SOUTHERN DI	STRICT OF MISSISSIPPI		
Case (if know		19-50859				heck if this is an
					a	mended filing
Scho Be as c	edule complete a ecutory co	and accurate as possible. Us	se Part 1 for credito that could result in	ISECURED ClaimS rs with PRIORITY claims and Part 2 for creditor a claim. Also list executory contracts on Sche Il Form 106G). Do not include any creditors with	edule A/B: Property (Offici	al Form 106A/B) and on
eft. Att	tach the Co			more space is needed, copy the Part you need formation to report in a Part, do not file that Pa		
Part 1	: List	All of Your PRIORITY Ur	secured Claims			
1. Do	o any cred	itors have priority unsecure	d claims against yo	u?		
	No. Go to	Part 2.				
	] Yes.					
Part 2	List	All of Your NONPRIORIT	Y Unsecured Cla	ims		
3. Do	o any cred	itors have nonpriority unse	cured claims agains	t you?		
	No. You h	nave nothing to report in this p	art. Submit this form	to the court with your other schedules.		
		iave nouming to repent in time p		to the count man your other conceanes.		
	Yes.					
ur th:	secured cl	aim, list the creditor separatel	y for each claim. For	tical order of the creditor who holds each claim each claim listed, identify what type of claim it is. E in Part 3.If you have more than three nonpriority u	Oo not list claims already inc	luded in Part 1. If more
						Total claim
4.1	CBA-T	CIFTON	las	t 4 digits of account number		\$300.00
7.1		rity Creditor's Name			_	
		Main Street	Wh	en was the debt incurred?		-
		on, GA 31794 Street City State Zip Code	As	of the date you file, the claim is: Check all that a	nnly	
		curred the debt? Check one.		or and god me, and claim for chook all that a	PPI	
	Debt	or 1 only	п	Contingent		
		for 2 only		Unliquidated		
		-		Disputed		
		or 1 and Debtor 2 only ast one of the debtors and an		Disputed e of NONPRIORITY unsecured claim:		
			OUIICI	Student loans		
	debt	ck if this claim is for a com	illullity	Obligations arising out of a separation agreement of	or divorce that you did not	
		laim subject to offset?		ort as priority claims	si airoide tilat you did flot	
	■ No			Debts to pension or profit-sharing plans, and other	similar debts	
	☐ Yes			Other. Specify Collection		-

## 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 15 of 51

Debtor	1 John Brian Bergeron	Case number (if known)19-50859	
4.2	Credit Bureau Associates Nonpriority Creditor's Name	Last 4 digits of account number 4827	\$146.50
	321 Main Street	When was the debt incurred?	
	Tifton, GA 31794  Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	one of the control of	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills-Affinity Clinic	
4.3	Credit Bureau Associates	Last 4 digits of account number 6836	\$2,717.23
	Nonpriority Creditor's Name 321 Main Street Tifton, GA 31794	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Medical Bills-Affinity Health-John Bergeron Medical Bills-Georgia Sports Medicine/ Tifton Radiology-A.Bergeron	
4.4	Credit Bureau Associates Nonpriority Creditor's Name	Last 4 digits of account number 1822	\$72.71
	321 Main Street Tifton, GA 31794	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical Bills-Cook Primary Care	

## 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 16 of 51

Debto	1 John Brian Bergeron	Case number (if known) 19-50859	
4.5	CREDIT ONE BANK  Nonpriority Creditor's Name PO BOX 98872 Las Vegas, NV 89193-8872  Number Street City State Zip Code  Who incurred the debt? Check one.	Last 4 digits of account number 8374  When was the debt incurred?  As of the date you file, the claim is: Check all that apply	\$323.05
	■ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a community debt  Is the claim subject to offset?  ■ No  □ Yes	□ Contingent □ Unliquidated □ Disputed  Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card	
4.6	D&M Service Co.  Nonpriority Creditor's Name PO BOX 13 Tifton, GA 31793  Number Street City State Zip Code Who incurred the debt? Check one.  ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ■ No □ Yes	When was the debt incurred?  6/4/18  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Medical Bills	\$275.00
4.7	DEPT OF ED/ NAVIENT  Nonpriority Creditor's Name PO BOX 9635 Wilkes Barre, PA 18773  Number Street City State Zip Code Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  No Yes	When was the debt incurred?  As of the date you file, the claim is: Check all that apply  Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	\$42,082.00

## 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 17 of 51

Debtor	·1 _John Brian Bergeron	Case number (if known) 19-50859	
4.8	Douglas Internal Medicine Nonpriority Creditor's Name	Last 4 digits of account number 6273	\$100.14
	Att #21612W P.O. BOX 14000 Belfast, ME 04915-4033 Number Street City State Zip Code	When was the debt incurred?  As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the date you me, the claim is. Shook an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	$\square$ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.9	FINGERHUT	Last 4 digits of account number 6992	\$250.00
	Nonpriority Creditor's Name 6250 Ridgewood RD Saint Cloud, MN 56303	When was the debt incurred? 7/2016	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit Card	
4.1	FIRST ACCESS VISA	Last 4 digits of account number 3639	\$373.18
0	Nonpriority Creditor's Name		4373.10
	PO BOX 89028 Sioux Falls, SD 57109-9028	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	□ res	■ Other. Specify _Credit Card	

## 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 18 of 51

Debtor	1 John Brian Bergeron	Case number (if known)19-50859	
4.1	Lawson Hamilton & Assoc  Nonpriority Creditor's Name	Last 4 digits of account number 5971	\$59.84
	610 N Glenoaks Blvd Suite 101 Burbank, CA 91502	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other Specify Cox Family Medicine	
4.1	MEDICAL COLLEGE GA	Last 4 digits of account number	\$100.00
	Nonpriority Creditor's Name 1120 1st Street Augusta, GA 30912	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bills	
4.1	TIFT REGIONAL Nonpriority Creditor's Name	Last 4 digits of account number	\$200.00
	901 East 18th Street Tifton, GA 31793	When was the debt incurred?	
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Medical Bills	

Debtor 1	John Br	ian Bergeron		Case no	umber (if known)	19-50859	
4	fton Cardiovascular LLC Last 4 digits of account num		Last 4 digits of account number	0270	)	_	\$1,031.10
14 Su	99 Kenn ite C	edy Road A 31794-4177	When was the debt incurred?				
Nu	mber Street	City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	call that apply		
	Debtor 1 onl	ly	☐ Contingent				
	☐ Debtor 2 only		☐ Unliquidated				
	Debtor 1 and	d Debtor 2 only	☐ Disputed				
	At least one	of the debtors and another	Type of NONPRIORITY unsecure	ed claim:			
	Check if thi	s claim is for a community	☐ Student loans				
del	ot	bject to offset?	☐ Obligations arising out of a sep report as priority claims	aration ag	greement or divorce	that you did not	
	No		Debts to pension or profit-shari	ing plans,	and other similar de	ebts	
	Yes		■ Other. Specify Medical	Bills			
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed				
Name and A	ddress RNEY/DE E HURST TH AVE	PT OF ED Lir 2ND FLR 9501	which entry in Part 1 or Part 2 did you be $\frac{4\cdot7}{2}$ of ( <i>Check one</i> ):	Part 1:	Creditors with Prior	ity Unsecured Claims	
		Lu	3. 4 digits of account number				
		mounts for Each Type of Unso	ecured Claim s. This information is for statistical	reporting	purposes only. 28	8 U.S.C. §159. Add t	he amounts for each
type of un	secured cla	im.			Total	Claim	
Tota		Domestic support obligations		6a.	\$	0.00	
claims from Part 1	6b. 6c.	Taxes and certain other debts y Claims for death or personal inj Other. Add all other priority unsec		6b. 6c. 6d.	\$ \$ \$	0.00	
	6e.	Total Priority. Add lines 6a throug	gh 6d.	6e.	\$	0.00	
					Tatal	Ola-i	
Tota	6f.	Student loans		6f.	\$	Claim 42,082.00	
claims from Part 2		you did not report as priority cla	aration agreement or divorce that aims ng plans, and other similar debts	6g. 6h.	\$ *	0.00	
	6i.		secured claims. Write that amount	6i.	\$	5,948.75	
	6j.	Total Nonpriority. Add lines 6f th	rough 6i.	6j.	\$	48,030.75	

Fill in this information to identify your case:					
Debtor 1 John Brian Ber		geron Middle Name	Last Name		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		SOUTHERN DISTRICT	OF MISSISSIPPI		
Case number	19-50859				
(if known)					Check if this is an amended filing

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Р	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Aaron Rentals 501 E 5th Street Tifton, GA 31794	Lease for a Sofa
2.2	Courtney Blankay	I rent the Diamonhead property from her and I am now month to month lease @ \$650 per month

Fill in this	information to identify your	case:			
Debtor 1	John Brian Bei	rgeron			
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	SOUTHERN DISTRICT	OF MISSISSIPPI		
Case numl	ber 19-50859				
(if known)				☐ Check if this is an amended filing	
Officia	l Form 106H				
	lule H: Your Cod	ehtors		12/1	5
iill it out, al your name  1. Do y  No Yes  2. With Arizon  No. Yes  3. In Colin line	nd number the entries in the and case number (if known) you have any codebtors? (If  hin the last 8 years, have you a, California, Idaho, Louisiana, Go to line 3. b. Did your spouse, former spou	boxes on the left. Attack . Answer every question you are filing a joint case, I lived in a community pr Nevada, New Mexico, Pu use, or legal equivalent live ors. Do not include your f that person is a guaran	the Additional Page to  do not list either spouse  operty state or territory erto Rico, Texas, Washin  with you at the time?  spouse as a codebtor tor or cosigner. Make s	y? (Community property states and territories include	own icial
out Co	Column 1: Your codebtor	,	ule 9 (Official Form To	Column 2: The creditor to whom you owe the de	
1	Name, Number, Street, City, State and Zl	P Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
_				☐ Schedule G, line	
	Number Street City	State	ZIP Code		
				Dotati Dr.	
3.2	Name			_ □ Schedule D, line □ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

Fill in this inform	ation to identify your case:	
Debtor 1	John Brian Bergeron	
Debtor 2 (Spouse, if filing)		
United States Ba	ankruptcy Court for the: SOUTHERN DISTRICT OF MISSISSIPPI	
Case number (If known)	19-50859	Check if this is:  An amended filing  A supplement showing postpetition chapter
Official Fo	orm 106I	13 income as of the following date:  MM / DD/ YYYY

#### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Describe Employment Part 1: Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. ■ Employed ■ Employed If you have more than one job, **Employment status** attach a separate page with ☐ Not employed ■ Not employed information about additional employers. Dean of Students/ Coach/ Occupation manager Teacher Include part-time, seasonal, or self-employed work. Pople John Paul II High Employer's name Tift Regional Medical Center School Occupation may include student or homemaker, if it applies. **Employer's address** 1901 Jaguar Drive P.O. Box 807 Slidell, LA 70461 Tifton, GA 31793 How long employed there? 17 months 10 years

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filling spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 5,156.66 \$ 4,745.87

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 5,156.66 \$ 4,745.87

Official Form 106I Schedule I: Your Income page 1

Debt	or 1	John Brian Bergeron		Case	number (if known)	19-5	0859	
				For	Debtor 1		Debtor 2 or	
	Con	by line 4 here	4.	\$	5,156.66	non-	filing spouse 4,745.87	
			٠.	Ψ_	3,130.00	Ψ	1,713.07	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	594.30	\$	749.67	
	5b. 5c.	Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5b. 5c.	\$_ \$	204.52	\$	314.17 229.67	
	5d.	Required repayments of retirement fund loans	5d.	\$-	0.00	\$	450.67	
	5e.	Insurance	5e.	\$_	128.76	\$	0.00	
	5f.	Domestic support obligations	5f.	\$_	0.00	\$	0.00	
	5g. 5h.	Union dues Other deductions Specific Learn / Adv	5g. 5h.+	\$_ - \$	500.00	, \$—	0.00	
	on.	Other deductions. Specify: Loan/Adv Tithing	_ 311. <del>1</del>	· \$_	25.00	* \$	0.00	
6.	۸۵۵	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	– 6.	• —	1,452.58	¢ —	1,744.18	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	Ψ _	3,704.08	\$	3,001.69	
			٧.	Ψ_	3,704.00	Ψ	3,001.09	
8.	Ba.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm						
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total						
		monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive						
		Include alimony, spousal support, child support, maintenance, divorce	8c.	\$	0 00	Ф	0 00	
	8d.	settlement, and property settlement.  Unemployment compensation	8d.	\$ \$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$-	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		•	0.00	•	0.00	
	8g.	Specify: Pension or retirement income	– 8f. 8g.	\$_ \$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	8h.+	* —	0.00		0.00	
				· –		<u> </u>		
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	3	,704.08 + \$_	3,00	1.69 = \$ 6,70	5.77
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a	depen		•		chedule J.	
	Spe	cify:					11. +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The resulte that amount on the Summary of Schedules and Statistical Summary of Certain lies					<b>12.</b> \$6,70!	5.77
							Combined monthly income	ome
13.	Do y	you expect an increase or decrease within the year after you file this form?	?				monthly inc	onie
		Yes. Explain:						

Official Form 106l Schedule I: Your Income page 2

Fill	in this information to identify your case:				
Deb	tor1 John Brian Bergeron		Che □	ck if this is: An amended filing	
Deb	tor 2			A supplement show	ving postpetition chapter
(Spo	buse, if filing)			13 expenses as of	the following date:
Unit	ed States Bankruptcy Court for the: SOUTHERN DISTRICT OF MISSI	SSIPPI		MM / DD / YYYY	
	e number 19-50859 nown)				
0	fficial Form 106J				
S	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people are primation. If more space is needed, attach another sheet to this finber (if known). Answer every question.				
Par 1.	t 1: Describe Your Household Is this a joint case?				
	No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	□ No □ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Housel	nold of Deb	otor 2.	
2.	,	,			
۷.		Donandant's relatio	nahin ta	Donandant's	Does dependent
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	live with you?
	Do not state the				□ No
	dependents names.	Daughter		23	Yes
					□ No
					☐ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? □ No ■ Yes				_ 100
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	imate your expenses as of your bankruptcy filing date unless your senses as of a date after the bankruptcy is filed. If this is a suppolicable date.				
Inc	lude expenses paid for with non-cash government assistance if	vou know			
the	value of such assistance and have included it on Schedule I: Y			Vour ove	2000
(Of	ficial Form 106l.)			Your expo	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$	\$	650.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	:	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$	<del></del>	100.00

5. Additional mortgage payments for your residence, such as home equity loans

Debtor 1	John Brian Bergeron	Case number (if known)	19-50859
	41		
	ties:	60 ¢	96.00
6a.	Electricity, heat, natural gas		0.00
6b.	Water, sewer, garbage collection	6b. \$	
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. \$	170.00
6d.	and the set of the set	6d. \$	378.00
	GA home sewer, garbage collection	\$	140.00
	d and housekeeping supplies	7. \$	786.00
	dcare and children's education costs	8. \$	0.00
	thing, laundry, and dry cleaning	9. \$	170.00
	sonal care products and services	10. \$	50.00
	lical and dental expenses	11. \$	100.00
	nsportation. Include gas, maintenance, bus or train fare.	40. 0	050 00
	not include car payments.	12. \$	250.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
4. Cha	ritable contributions and religious donations	14. \$	150.00
5. <b>Ins</b> i	irance.		
	not include insurance deducted from your pay or included in lines 4 or 20.		
	Life insurance	15a. \$	0.00
	Health insurance	4.51. A	0.00
	Vehicle insurance	15c. \$	362.00
	Other insurance. Specify:	15d. \$	0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	es. Do not include taxes deducted from your pay of included in lines 4 of 20. cify:	16. \$	0.00
	allment or lease payments:	10. ψ	0.00
	Car payments for Vehicle 1	17a. \$	0.00
	Car payments for Vehicle 2	17a. \$	0.00
	· ·	· —	0.00
	Other. Specify:	17c. \$	
	Other. Specify:	17d. \$	0.00
	r payments of alimony, maintenance, and support that you did not report as	10 f	0.00
	ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18. \$	
	er payments you make to support others who do not live with you.	\$	0.00
	cify:	19.	
	er real property expenses not included in lines 4 or 5 of this form or on School		
20a	. Mortgages on other property	20a. \$	0.00
20b	Real estate taxes	20b. \$	0.00
20c	Property, homeowner's, or renter's insurance	20c. \$	0.00
20d	. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e	Homeowner's association or condominium dues	20e. \$	0.00
1. Oth	er: Specify: Wife Bankruptcy Payment (Case No. 17-70275)	21. +\$	950.00
	culate your monthly expenses		
22a	Add lines 4 through 21.	\$	4,452.00
22b	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
	Add line 22a and 22b. The result is your monthly expenses.	\$	4,452.00
		L Ψ	
:3. Cal	culate your monthly net income.	·	
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	6 <b>,</b> 705.77
	Copy your monthly expenses from line 22c above.	23b\$	4,452.00
			,
230	Subtract your monthly expenses from your monthly income.		
_50	The result is your <i>monthly net income</i> .	23c. \$	2,253.77
	Jour monary not moone.	<u> </u>	
24. Do	you expect an increase or decrease in your expenses within the year after yo	ou file this form?	
	example, do you expect to finish paying for your car loan within the year or do you expect you		ease or decrease because of a
	ification to the terms of your mortgage?		
	, , ,		
$\Box$	Yes Explain here:		

Fill in this inforn	nation to identify your	case:			
Debtor 1	John Brian Ber				
Dahtar 0	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRICT O	F MISSISSIPPI		
Case number 1	19-50859				
(if known)					☐ Check if this is an amended filing
	ion About a	an Individual I			12/15
obtaining money rears, or both. 18		n connection with a bankrı			ement, concealing property, or 0, or imprisonment for up to 20
		eone who is NOT an attorne	ey to help you fill out	bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				cruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	ity of perjury, I declare true and correct.	that I have read the summ	ary and schedules fi	led with this declaratio	n and
<b>X</b> /s/ Jc	ohn Brian Berger	on	X		
John E	Brian Bergeron	<del></del>	Signature o	of Debtor 2	
Signatur	e of Debtor 1		-		

	formation to identify you				
Debtor 1	John Brian Be	ergeron Middle Name	Last Name		
Debtor 2	-				
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT O	OF MISSISSIPPI		
Case numbe (if known)	r <u>19-50859</u>				Check if this is an amended filing
					Ü
	Form 107	Affaira for Indivis	lucio Filipa for F	a m leve em taxe	
Be as comple information.	ete and accurate as possi	Affairs for Indivicular to the street to the	re filing together, both are	equally responsible for su	
Part 1: Gi	ve Details About Your Ma	arital Status and Where You	Lived Before		
1. What is	your current marital statu	ıs?			
_	ried married				
2. During t	he last 3 years, have you	lived anywhere other than v	where you live now?		
□ No					
_	. List all of the places you I	ived in the last 3 years. Do no	ot include where you live nov	٧.	
Debtor	1 Prior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
	. Park Ave n, GA 31794	From-To: 1991-June 2 2018	Same as Debtor 8,	1	☐ Same as Debtor 1 From-To:
No Yes  Part 2 Ex  4. Did you Fill in the	mitories include Arizona, Ca . Make sure you fill out Scl splain the Sources of You have any income from en total amount of income yo	nployment or from operating u received from all jobs and a	vada, New Mexico, Puerto R ficial Form 106H).  g a business during this y ll businesses, including part	ico, Texas, Washington and ear or the two previous cale time activities.	Wisconsin.)
If you are  ☐ No	e filing a joint case and you	have income that you receive	e together, list it only once u	nder Debtor 1.	
_	. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	ry 1 of current year until filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$20,528.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known) 19-50859

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	idar year: December 3	1, 2018 )	■ Wages, commissions, bonuses, tips	\$45,700.00	☐ Wages, combonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
		dar year befo December 3		■ Wages, commissions, bonuses, tips	\$65,920.00	☐ Wages, combonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
	winnings.  List each	If you are filir	ng a joint ca	pensions; rental income; inte se and you have income that ome from each source separa	you received together, list it	only once under D	ebtor 1.	, and letter
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Pa	rt 3: Lis	t Certain Pay	ments You	Made Before You Filed for	Bankruptcy			
6.	Are eithe ☐ No.	Neither De	btor 1 nor [	e's debts primarily consume Debtor 2 has primarily consu a personal, family, or househo	umer debts. Consumer deb	ts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		During the S	Go to line 7	each creditor to whom you pa	id a total of \$6,825* or more	in one or more pay	ments and t	
		* Subject to	not include	reditor. Do not include payment payments to an attorney for to to a 4/01/22 and every 3 year	his bankruptcy case.			•
	■ Yes.			or both have primarily consu ore you filed for bankruptcy, di		al of \$600 or more	?	
		□ No.	Go to line 7	7.				
		■ Yes	include pay	each creditor to whom you pa /ments for domestic support o r this bankruptcy case.				
	Creditor	's Name and	Address	Dates of payme	ent Total amount paid	Amount you still owe	Was this p	payment for
	Geogri	a Power (	Co.	March, Apri May 2019		\$0.00	☐ Mortgae ☐ Car ☐ Credit ( ☐ Loan R ☐ Supplie ☐ Other_	Card

Debtor 1 John Brian Bergeron

Case number (if known) 19-50859

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this p	ayment for
	Courtney Blankay		\$1,950.00	\$0.00	Other_	ard epayment s or vendors month to month
					lease @ month	\$650 per
7.	Within 1 year before you filed for bankruptour Insiders include your relatives; any general particle of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	ortners; relatives of any gen control, or owner of 20% o	eral partners; partner r more of their voting	erships of which y g securities; and	ou are a gener any managing	al partner; corporations agent, including one for
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
<b>Par</b> 9.	Within 1 year before you filed for bankrupto	Dates of payment  ns, and Foreclosures  cy, were you a party in an			Include cre	
	modifications, and contract disputes.					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of t	he case
	John Brian Bergeron and Jill Gregoire Bergeron Middle District Georgia Bankruptcy Court	Bankruptcy			☐ Pending ☐ On app ☐ Conclud	eal ded
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, f	oreclosed, garn	shed, attache	d, seized, or levied?
	Creditor Name and Address	Describe the Property		Date	)	Value of the
		Explain what happened	ı			property
		Explain what happened				

Debtor 1 John Brian Bergeron

Deb	otor1 John Brian Bergeron		Case num	nber ( <i>if ki</i>	nown) <u>19-50859</u>	9
11.	Within 90 days before you filed for bankr accounts or refuse to make a payment be No Yes. Fill in the details.		did any creditor, including a bank or financia you owed a debt?	al institu	ution, set off any	amounts from your
	Creditor Name and Address	De	scribe the action the creditor took	-	Date action was	Amount
	Creditor Name and Address	De	scribe the action the creditor took		aken	Amount
12.	Within 1 year before you filed for bankrup court-appointed receiver, a custodian, or  No Yes		as any of your property in the possession of er official?	an ass	ignee for the ben	efit of creditors, a
Dor	Liet Cortain Cifts and Contribution	_				
Par	t 5: List Certain Gifts and Contribution	5				
13.	Within 2 years before you filed for bankro  No  Yes. Fill in the details for each gift.	iptcy, d	did you give any gifts with a total value of mo	ore than	ı \$600 per person	1?
	Gifts with a total value of more than \$60	n	Describe the gifts		Dates you gave	Value
	per person	•	Describe the girts		the gifts	Value
	Person to Whom You Gave the Gift and					
	Address:					
14.	Within 2 years before you filed for bankro  ■ No  □ Yes. Fill in the details for each gift or co		did you give any gifts or contributions with a	total va	alue of more than	s \$600 to any charity?
	Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
		otcy or	since you filed for bankruptcy, did you lose	anythin	ng because of the	eft, fire, other disaster,
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pendince claims on line 33 of Schedule A/B: Property.	ng l	Date of your oss	Value of property lost
Day	List Cartain Dayments or Transfers					
16.	Within 1 year before you filed for bankru consulted about seeking bankruptcy or p	otcy, di oreparii	id you or anyone else acting on your behalf ping a bankruptcy petition? s, or credit counseling agencies for services req	-		erty to anyone you
	Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y	ou	Description and value of any property transferred	c	Date payment or transfer was made	Amount of payment
	Christopher G. Holt 250114th Street Suite 211 Gulfport, MS 39501 cgerardholt@gmail.com		Legal Fee and filing fee			\$1,310.00

Debtor 1 John Brian Bergeron Case number (if known) 19-50859 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of payment Address transferred or transfer was made Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No П Yes. Fill in the details. Person Who Received Transfer Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No

☐ Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)

Last 4 digits of account number

Type of account or instrument Date account was closed, sold, moved, or transferred Last balance before closing or transfer

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No

☐ Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

■ No

☐ Yes. Fill in the details.

Name of Storage Facility
Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Case number (if known) 19-50859

Par	ts 0: Identify Property You Hold or Control for	Somoono Elso			
23.	Identify Property You Hold or Control for Do you hold or control any property that some for someone.		rty y	ou borrowed from, are storing for	, or hold in trust
	■ No				
	Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	De	scribe the property	Value
Pai	rt 10: Give Details About Environmental Inform	aation			
For	the purpose of Part 10, the following definitions	apply:			
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these su	air, land, soil, surface water, ground	_	•	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law,	whether you now own, operate, o	or utilize it or used
	Hazardous material means anything an enviror hazardous material, pollutant, contaminant, or		s wa	ste, hazardous substance, toxic s	ubstance,
Rep	port all notices, releases, and proceedings that y	ou know about, regardless of when	n the	ey occurred.	
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable	unc	der or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	y release of hazardous material?			
	■ No □ Yes. Fill in the details.				
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	d	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admini	strative proceeding under any envi	ironi	mental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.				
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case
Pai	rt 11: Give Details About Your Business or Cor	nnections to Any Business			
27.	Within 4 years before you filed for bankruptcy,	did you own a business or have ar	ny of	the following connections to any	business?
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity,	eith	ner full-time or part-time	
	☐ A member of a limited liability company	(LLC) or limited liability partnersh	ip (L	LP)	
	☐ A partner in a partnership				
	☐ An officer, director, or managing execu	tive of a corporation			
	☐ An owner of at least 5% of the voting or	•			
		. ,			

Official Form 107

Debtor 1 John Brian Bergeron

De	ebtor1 John Brian Bergeron		Case number (if k	nown) 19-50859
	☐ No. None of the above applies. Go to	Part 12		
	_	Il in the details below for each business		
	Business Name	Describe the nature of the business		dentification number
	Address	Describe the nature of the business		ude Social Security number or ITIN.
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates busi	ness existed
	JBB Enterprises, Inc.	Gymnastics Training		58-2362692
			From-To	12/1/1999-10/31/2017
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	otcy, did you give a financial statement t	to anyone about y	our business? Include all financial
	□ No			
	Yes. Fill in the details below.			
	Name	Date Issued		
	Address (Number, Street, City, State and ZIP Code)			
	South Georgia Banking Co. P.O. Box 1505 Tifton, GA 31793			
Pa	art 12: Sign Below			
are wit 18	ave read the answers on this Statement of Fire true and correct. I understand that making a h a bankruptcy case can result in fines up to U.S.C. §§ 152, 1341, 1519, and 3571.  Solution of the state of	a false statement, concealing property,	or obtaining mon	
Si	gnature of Debtor 1	-		
Da	nte June 3, 2019	Date		
	<b>I you attach additional pages to <i>Your Statem</i> No</b> Yes	ent of Financial Affairs for Individuals I	Filing for Bankrup	otcy (Official Form 107)?
	I you pay or agree to pay someone who is no No Yes. Name of Person Attach th	, ,,	. ,	gnature (Official Form 119).
	<del></del>	-		

Fill in this inforr	Fill in this information to identify your case:						
Debtor 1	Debtor 1John Brian Bergeron						
Debtor 2 (Spouse, if filing)							
United States E	United States Bankruptcy Court for the: Southern District of Mississippi						
Case number (if known)	19-50859						

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).					
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).					
	3. The commitment period is 3 years.					
	4. The commitment period is 5 years.					
	Check if this is an amended filing					

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1:	Calculate Your Average Monthly Income
I dit ii	odiodiate rour Average monthly moonie

- 1. What is your marital and filing status? Check one only.
  - □ Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1		Column B Debtor 2 or non-filing spouse		
Your gross wages, salary, tips, bonuses, overtime payroll deductions).	e, and commissions (before a	·II \$_	5,156.66	\$_	4,382.80
Alimony and maintenance payments. Do not include Column B is filled in.	e payments from a spouse if	\$_	0.00	\$_	0.00
All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househo and roommates. Do not include payments from a spouyou listed on line 3.  Net income from operating a business, profession, or farm	rt. Include regular contribution ld, your dependents, parents,		0.00	\$_	0.00
ross receipts (before all deductions)	\$ 0.00				
Ordinary and necessary operating expenses	<b>-\$</b> 0.00				
Net monthly income from a business, profession, or fa	arm \$ 0.00 Copy here	<b>-&gt;</b> \$_	0.00	\$_	0.00
Net income from rental and other real property	Debtor 1				
Gross receipts (before all deductions)	\$				
Ordinary and necessary operating expenses	<b>-\$</b> 0.00				
Net monthly income from rental or other real property	\$ 0.00 Copy here	->\$	0.00	\$	0.00

Case number (if known)

19-50859

			Column A Debtor 1		Column B Debtor 2 o	
7.	Interest, dividends, and royalties		\$	0.00	\$	0.00
	Unemployment compensation		\$	0.00	\$	0.00
	Do not enter the amount if you contend that the amount received was a benefit the Social Security Act. Instead, list it here:  For you\$0.0					
	For your spouse \$ 0.0					
9.	Pension or retirement income. Do not include any amount received that was benefit under the Social Security Act.		\$	0.00	\$	0.00
10.	<b>Income from all other sources not listed above.</b> Specify the source and am Do not include any benefits received under the Social Security Act or payment received as a victim of a war crime, a crime against humanity, or international domestic terrorism. If necessary, list other sources on a separate page and put total below.	s or				
		_	\$	0.00	\$	0.00
			\$	0.00	\$	0.00
	Total amounts from separate pages, if any.	+	\$	0.00	\$	0.00
11.	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$_5,	156.66	<b>+</b> \$ _4	,382.80	= \$ 9,539.46  Total average
	Copy your total average monthly income from line 11. Calculate the marital adjustment. Check one:					\$9,539.46
	You are not married. Fill in 0 below.					
	You are married and your spouse is filing with you. Fill in 0 below.					
	You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT dependents, such as payment of the spouse's tax liability or the spouse's Below, specify the basis for excluding this income and the amount of inco adjustments on a separate page.	suppor	t of someor	ne other tha	an you or you	ir dependents.
	If this adjustment does not apply, enter 0 below.					
		\$		_		
		\$				
		+\$				
	Total	\$	0.0	OO Cop	oy here=>	0.00
14.	Your current monthly income. Subtract line 13 from line 12.					\$9,539.46
15.	Calculate your current monthly income for the year. Follow these steps:					
	15a. Copy line 14 here=>					<b>9,</b> 539.46
	Multiply line 15a by 12 (the number of months in a year).					<b>x</b> 12
	15b. The result is your current monthly income for the year for this part of the					114,473.5

John Brian Bergeron

Debtor 1

Case number (if known) 19-50859

			-				
16	. Cal	culate	the median family income that applies to	you. Follow these steps:			
	16a	. Fill in	the state in which you live.	MS			
	16b	. Fill in	the number of people in your household.	3			
	16c	. Fill in	the median family income for your state and	size of household.		\$ 56,566.00	
		instru	nd a list of applicable median income amount actions for this form. This list may also be ava	s, go online using the link specified in that all able at the bankruptcy clerk's office.	ne separate		
17		_	ne lines compare?				
	17a	. ⊔	Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do				r
	17b	. =	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> your current monthly income from line 14	ulation of Your Disposable Income (C			ру
Par	t 3:	Cal	culate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)			
18.	Cop	y you	r total average monthly income from line	11	\$	9,539.46	_
	Dec	luct th tend th	e marital adjustment if it applies. If you ar at calculating the commitment period under acome, copy the amount from line 13.	e married, your spouse is not filing with	you, and you		
			marital adjustment does not apply, fill in 0 or	ı line 19a.	-\$	0.00	_
							]
	19b	. Subti	ract line 19a from line 18.			\$ 9,539.46	
20.	Cal	culate	your current monthly income for the year	. Follow these steps:			J
						\$ 9,539.46	
			oly by 12 (the number of months in a year).			<b>x</b> 12	,
	20b	. The r	esult is your current monthly income for the	ear for this part of the form		\$ 114,473.5	
	20c	. Сору	the median family income for your state and	size of household from line 16c		\$ 56,566.00	
	21.	How	do the lines compare?				J
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the court, on the top of p	age 1 of this form, check bo	ox 3, The commitment	
			Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ordered by the court, or	n the top of page 1 of this fo	orm, check box 4, The	
Par	t 4:	Sig	n Below				
	Bys	signing	here, under penalty of perjury I declare that	the information on this statement and in	n any attachments is true ar	nd correct.	
>	( <u>/</u> s	s/ Jo	hn Brian Bergeron				
			rian Bergeron e of Debtor 1				
		<b>9</b> Jun	ne 3, 2019				
	16		/ DD / YYYY				
	•		cked 17a, do NOT fill out or file Form 122C-2		and the second s	a francisco d'Alabar	
	IT yc	ou chec	cked 17b, fill out Form 122C-2 and file it with	this form. On line 39 of that form, copy	your current monthly incom	e irom line 14 above.	

Debtor 1

John Brian Bergeron

Debtor 1 John Brian Bergeron Case number (if known) 19-50859

## **Current Monthly Income Details for the Debtor**

#### **Debtor Income Details:**

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Pope Jone Paul II High School

Income by Month:

	Average per month:	\$5,156.66
Last Month:	04/2019	\$5,156.66
2 Months Ago:	03/2019	\$5,156.66
3 Months Ago:	02/2019	\$5,156.66
4 Months Ago:	01/2019	\$5,156.66
5 Months Ago:	12/2018	\$5,156.66
6 Months Ago:	11/2018	\$5,156.66

Debtor 1 John Brian Bergeron Case number (if known) 19-50859

### **Current Monthly Income Details for the Debtor's Spouse**

#### **Spouse Income Details:**

Income for the Period 11/01/2018 to 04/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Tift Regional

Income by Month:

	Average per month:	\$4,382.80
Last Month:	04/2019	\$4,382.80
2 Months Ago:	03/2019	\$4,382.80
3 Months Ago:	02/2019	\$4,382.80
4 Months Ago:	01/2019	\$4,382.80
5 Months Ago:	12/2018	\$4,382.80
6 Months Ago:	11/2018	\$4,382.80

Fill in	this information to identify your case:				
Debto	1 _ John Brian Bergeron				
Debto (Spou	e, if filing)				
United	States Bankruptcy Court for the: Southern District of	Mississippi			
Case (if kno	number <u>19-50859</u> wn)		☐ Chec	k if this is an amen	nded filing
	<u>Form 122C-2</u> pter 13 Calculation of Your Di	sposable In	come		04/19
	out this form, you will need your completed copy of itment Period (Official Form 122C-1).	Chapter 13 Statemer	nt of Your Current Monthly	Income and Calcu	lation of
space	complete and accurate as possible. If two married possible is needed, attach a separate sheet to this form, Inclunal pages, write your name and case number (if known Calculate Your Deductions from Your Income	ide the line number			
	Internal Revenue Service (IRS) issues National and				
	questions in lines 6-15. To find the IRS standards, g rmation may also be available at the bankruptcy cle		nk specified in the separa	te instructions for t	his form. This
exp	luct the expense amounts set out in lines 6-15 regardles enses if they are higher than the standards. Do not inclu C–1, and do not deduct any amounts that you subtracte	de any operating exp	enses that you subtracted fr	om income in lines 5	
If yo	our expenses differ from month to month, enter the avera	age expense.			
Not	e: Line numbers 1-4 are not used in this form. These nu	mbers apply to inform	ation required by a similar fo	orm used in chapter 7	7 cases.
5.	The number of people used in determining your de	ductions from incor	ne		
	Fill in the number of people who could be claimed as e plus the number of any additional dependents whom ye the number of people in your household.			3	
Nat	ional Standards You must use the IRS Nation	al Standards to answ	er the questions in lines 6-7		
6.	Food, clothing, and other items: Using the number of Standards, fill in the dollar amount for food, clothing, and		in line 5 and the IRS Nation	al \$	1,446.00
7.	Out-of-pocket health care allowance: Using the num the dollar amount for out-of-pocket health care. The nu people who are 65 or olderbecause older people hav higher than this IRS amount, you may deduct the addit	ımber of people is spli e a higher IRS allowa	t into two categoriespeople nce for health car costs. If ye	e who are under 65 a	and

Official Form 122C-2

19-50859

Case number (if known)

People who are under 65 years of age 7a. Out-of-pocket health care allowance per person X 2 7b. Number of people who are under 65 **\$** 110.00 7c. Subtotal. Multiply line 7a by line 7b. Copy here=> \$ 110.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person **\$** 114 7e. Number of people who are 65 or older \$ 114.00 7f. Subtotal. Multiply line 7d by line 7e. Copy here=> \$ 114.00 7g. **Total.** Add line 7c and line 7f 224.00 Copy total here=> \$ 224.00 Local Standards You must use the IRS Local Standards to answer the questions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 561.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 973.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment 250.00 Ameris Bank \$ Caliber Home Loans 994.17 Repeat this amount Copy 9b. Total average monthly payment 1,244.17 1,244.17 here=> on line 33a. 9c. Net mortgage or rent expense. Subtract line 9b (total average monthly payment) from line 9a (mortgage Copy 0.00 0.00 \$ or rent expense). If this number is less than \$0, enter \$0. here=> 10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and 0.00 affects the calculation of your monthly expenses, fill in any additional amount you claim. Explain why:

Debtor 1

John Brian Bergeron

Case number (if known)

19-50859

11.	Local transportation expenses: Check the number of vehi	cles for which you clain	n an ownership or o	perating expense.	
	☐ 0. Go to line 14.				
	☐ 1. Go to line 12.				
	■ 2 or more. Go to line 12.				
12.	Vehicle operation expense: Using the IRS Local Standard operating expenses, fill in the <i>Operating Costs</i> that apply for				420.00
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local You may not claim the expense if you do not make any loan more than two vehicles.				
Ve	hicle 1 Describe Vehicle 1: 2014 Ford Focus Pa Plan-Case No.: 17-		napter 13		
13a.	. Ownership or leasing costs using IRS Local Standard		\$	0.00	
13b.	. Average monthly payment for all debts secured by Vehicle 1				
	Do not include costs for leased vehicles.				
	To calculate the average monthly payment here and on line are contractually due to each secured creditor in the 60 mon bankruptcy. Then divide by 60.		nat		
	Name of each creditor for Vehicle 1	Average monthly payment			
	-NONE-	\$			
	Total Average Monthly Payment	\$0.00	Copy here => -\$	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if the numbert is less than \$6	D, enter \$0		Copy net Vehicle 1 expense here =>	0.00
Ve	hicle 2 Describe Vehicle 2: 2014 Jeep Compas I Chapter 13 Plan-Ca	oriven by Wife-Ease No.: 17-7027	Paid in Wife's	5	
13d.	. Ownership or leasing costs using IRS Local Standard		\$	0.00	
13e.	. Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs f	or		
	Name of each creditor for Vehicle 2	Average monthly payment			
	-NONE-	\$	-		
	Total average monthly payment	\$0.00	Copy here => -\$	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0	), enter \$0		Copy net Vehicle 2 expense here =>	0.00
14.	Public transportation expense: If you claimed 0 vehicles Public Transportation expense allowance regardless of			ds, fill in the	0.00
15.	Additional public transportation expense: If you claimed also deduct a public transportation expense, you may fill in word claim more than the IRS Local Standard for <i>Public Trans</i>	what you believe is the			0.00

Debtor 1

John Brian Bergeron

19-50859

Case number (if known)

**Other Necessary Expenses** In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories. 16. Taxes: The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. 1,200.08 Do not include real estate, sales, or use taxes. 17. Involuntary deductions: The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. 704.52 Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings. 18. Life Insurance: The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form 43.66 of life insurance other than term. 19. Court-ordered payments: The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. 0.00 Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35. 20. **Education:** The total monthly amount that you pay for education that is either required: as a condition for your job. or 0.00 for your physically or mentally challenged dependent child if no public education is available for similar services. 21. Childcare: The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. 0.00 Do not include payments for any elementary or secondary school education. 22. Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. 0.00 Payments for health insurance or health savings accounts should be listed only in line 25. 23. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment 0.00 expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted. 4,599.26 24. Add all of the expenses allowed under the IRS expense allowances. Add lines 6 through 23. **Additional Expense Deductions** These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24. 25. Health insurance, disability insurance, and health savings account expenses. The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents. Health insurance 81.19 Disability insurance 0.00 0.00 Health savings account Total 81.19 Copy total here=> 81.19 Do you actually spend this total amount? П No. How much do you actually spend? \$ 26. Continued contributions to the care of household or family members. The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may 0.00 include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b). 27. Protection against family violence. The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. 0.00 By law, the court must keep the nature of these expenses confidential.

Debtor 1

John Brian Bergeron

btor 1	John Brian Bergeron	Case	number (if know	n) <u>19-</u> 5	50859		
28.	Additional home energy costs. Your hom line 8.	e energy costs are included in your insurance	and operatin	g expense	s on		
	If you believe that you have home energy of 8, then fill in the excess amount of home en	osts that are more than the home energy costs lergy costs.	s included in	expenses	on line		
	You must give your case trustee documenta amount claimed is reasonable and necessar	ation of your actual expenses, and you must sh ry.	now that the a	additional		\$_	0.00
	Education expenses for dependent child \$170.83* per child) that you pay for your de public elementary or secondary school.	Iren who are younger than 18. The monthly e pendent children who are younger than 18 yea	expenses (no ars old to atte	t more tha end a priva	n te or		
	You must give your case trustee documenta claimed is reasonable and necessary and n	ation of your actual expenses, and you must ex ot already accounted for in lines 6-23.	xplain why th	e amount			
	* Subject to adjustment on 4/01/22, and ever	ery 3 years after that for cases begun on or after	er the date of	adjustme	nt.	\$_	0.00
		he monthly amount by which your actual food a allowances in the IRS National Standards. The s in the IRS National Standards.					
		ional allowance, go online using the link specifico be available at the bankruptcy clerk's office.	ied in the sep	oarate			
	You must show that the additional amount of	claimed is reasonable and necessary.				\$_	0.00
	<b>Continuing charitable contributions.</b> The instruments to a religious or charitable orga	amount that you will continue to contribute in t nization. 11 U.S.C. § 548(d)(3) and (4).	the form of ca	ash or fina	ncial		
	Do not include any amount more than 15%	of your gross monthly income.			,	\$_	150.00
32.	Add all of the additional expense deduct Add lines 25 through 31.	ions.				\$	231.19
33. <b>F</b>		in property that you own, including home m	nortgages, v	ehicle			
33. <b>F</b> I	For debts that are secured by an interest in oans, and other secured debt, fill in lines to calculate the total average monthly payment or editor in the 60 months after you file for bar	33a through 33e. ent, add all amounts that are contractually due				Nyoros	ro monthly
33. F I	For debts that are secured by an interest in oans, and other secured debt, fill in lines  To calculate the total average monthly payments	33a through 33e. ent, add all amounts that are contractually due				Averaç oayme	ge monthly ent
33. <b>F</b>	For debts that are secured by an interest in oans, and other secured debt, fill in lines. For calculate the total average monthly payment or editor in the 60 months after you file for bar Mortgages on your home.	33a through 33e. ent, add all amounts that are contractually due	to each secu	ured		oayme	
33. <b>F</b>	For debts that are secured by an interest in oans, and other secured debt, fill in lines. For calculate the total average monthly payment or editor in the 60 months after you file for bar Mortgages on your home.	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	ured	F	oayme	ent
33. <b>F</b> Id C 33a.	For debts that are secured by an interest is coans, and other secured debt, fill in lines. To calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home.  Copy line 9b here	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	ured	F	oayme	ent
33. <b>F</b> Id of 33a.	For debts that are secured by an interest is coans, and other secured debt, fill in lines. To calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home.  Copy line 9b here	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	ured	=> 5	oayme	ent L,244.17
33. <b>F</b>	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymetreditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	ured	=> 5	<b>5</b> 1	0.00
33. <b>F</b> 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	For debts that are secured by an interest is coans, and other secured debt, fill in lines. To calculate the total average monthly paymereditor in the 60 months after you file for bare.  Mortgages on your home.  Copy line 9b here.  Loans on your first two vehicles.  Copy line 13b here.  Copy line 13e here.	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	ured	=> S => S ent	<b>5</b> 1	0.00
33. <b>F</b> 10 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	oes paymoclude taxe	=> S => S ent	<b>5</b> 1	0.00
33. <b>F</b> lo 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bar Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	to each secu	oes paymoloclude taxe	=> (	6	0.00
33. <b>F</b> lo 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bare Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts  se of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	D in or	oes paymoloclude taxe	=> S => S ent	6	0.00
33. <b>F</b> lo 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bare Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts  se of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	D in or	oes paymiculade taxes r insurance No	=> (	6	0.00
33. <b>F</b> lo 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bare Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts  se of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	D in oi	oes paymondelude taxer insurance No Yes No	=> (	6	0.00
33. <b>F</b> lo 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bare Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts  se of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	D in or	oes paymondelude taxer insurance No Yes No	=> (	6	0.00
33. <b>F</b> lo 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bare Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts  se of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	D in or	oes paymiclude taxer insurance No Yes No Yes	=> (	6	0.00
33. <b>F</b> 10 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bare Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts  se of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	D in o	oes paymoniculate taxes rinsurance No Yes No Yes No No	=> (	<b>5</b>	0.00
33. <b>F</b> 10 33a. 33b. 33c. 33d.	For debts that are secured by an interest is coans, and other secured debt, fill in lines for calculate the total average monthly paymereditor in the 60 months after you file for bare Mortgages on your home  Copy line 9b here  Loans on your first two vehicles  Copy line 13b here  Copy line 13e here  List other secured debts  se of each creditor for other secured debt	33a through 33e. ent, add all amounts that are contractually due nkruptcy. Then divide by 60.	D in or	oes paymondelude taxer insurance No Yes No Yes No No	=>	<b>5</b>	0.00

tor 1	0 0 1 1 1 1	Brian Bergeron			Case	e number (if known)	19-5085	, ,	
			e 33 secured by your prir our support or the suppor			<b>,</b>			
	No.	Go to line 35.							
	I		must pay to a creditor, in a passession of your property ( n the information below.						
Name	of the c	creditor	Identify property that sec	ures the debt		Total cure amour	nt	Monthly	
Cali	ber H	Home Loans	409 Park Ave. N. 31794 Tift Cour		\$	19,319.	00 ÷ 60 =	\$	321.98
					\$		÷ 60 =	\$	
					\$		÷ 60 = +	+\$	
					Total	\$321	Cop tota here		321.98
are	past d		uch as a priority tax, child f your bankruptcy case?		·	nat			
			Ill of these priority claims. D		rrent or				
			ch as those you listed in lin		rrent or	<b>\$</b> 0	.00 ÷6	60 <b>\$</b>	0.00
	(	ongoing priority claims, su	ch as those you listed in lin			\$	.00 ÷6	so \$_	0.00
6. <b>Pro</b> Cur Offi the To fi	rent muce of the Executing a list	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as the United States Courts (for tive Office for United States tof district multipliers that inclined states to for the country of the c	ch as those you listed in lin	the Administrativ North Carolina) o tricts). ng the link specified	/e or by d in the				0.00
66. <b>Pro</b> Cur  Offi  the  To fi  sepa	rent muce of the Executind a list	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as the United States Courts (for tive Office for United States tof district multipliers that inclined states to for the country of the c	ch as those you listed in lindue priority claims  n payment  stated on the list issued by or districts in Alabama and I is Trustees (for all other distudes your district, go online using the may also be available at the best	the Administrativ North Carolina) o tricts). ng the link specified	/e or by d in the	\$	.00 ÷6	otal	0.00
Cur Offi the To fi sepa Ave	rent muce of the Executind a list arate inserage m	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as the United States Courts (for tive Office for United States to f district multipliers that inclustructions for this form. This list	ch as those you listed in lindue priority claims  n payment stated on the list issued by or districts in Alabama and I is Trustees (for all other distudes your district, go online using the may also be available at the bense	the Administrativ North Carolina) o tricts). ng the link specified	/e or by d in the	\$	Copy t	otal > \$	1,566.15
66. <b>Pro</b> Cur Offi the To fi sepa Ave	rent muce of the Executind a list arate inserage mudd all odd lines	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as the United States Courts (for tive Office for United State tof district multipliers that inclustructions for this form. This lies monthly administrative expenses	ch as those you listed in lindue priority claims  n payment stated on the list issued by or districts in Alabama and I is Trustees (for all other distudes your district, go online using the may also be available at the bense	the Administrativ North Carolina) o tricts). ng the link specified	/e or by d in the	\$	Copy t	otal > \$	
General Description of the Toffs separate Average Aver	rent muce of the Execution a list arate inserage medical lines	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as the United States Courts (for tive Office for United States to f district multipliers that inclustructions for this form. This list monthly administrative expenses a 33e through 36.	ch as those you listed in lindue priority claims  n payment stated on the list issued by or districts in Alabama and I is Trustees (for all other distudes your district, go online using may also be available at the bense	the Administrativ North Carolina) o tricts). ng the link specified	/e or by d in the	\$	Copy t	otal > \$	
66. Pro Cur Offi the To fi sepa Ave	rent muce of the Execution a list arate inserage medical lines beduction all of all of appy line	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as ne United States Courts (for tive Office for United State to f district multipliers that inclistructions for this form. This list monthly administrative expensions from Income the allowed deductions at 24, All of the expenses a	ch as those you listed in lindue priority claims  n payment  stated on the list issued by or districts in Alabama and I is Trustees (for all other distudes your district, go online using the may also be available at the bense  of payment.	the Administrativ North Carolina) o tricts). ng the link specified pankruptcy clerk's o	/e or by d in the	\$ X \$	Copy t	otal > \$	
6. Pro Cur Offithe To fi sepa Ave 7. Ac Ac Cotal D 8. Add ex	rent muce of the Execution a list arate inserage much did all of oppy line repense	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as ne United States Courts (for tive Office for United State to f district multipliers that inclistructions for this form. This list monthly administrative expensions from Income the allowed deductions at 24, All of the expenses a	ch as those you listed in lindue priority claims  n payment  stated on the list issued by or districts in Alabama and I is Trustees (for all other distudes your district, go online using the may also be available at the bense in the payment.	the Administrativ North Carolina) o tricts). ng the link specified pankruptcy clerk's o	/e or by d in the office.	\$ X \$	Copy t	otal > \$	
66. Pro Cur Offi the To fi sepa Ave 67. Ac Cotal D 68. Add Cc ex Cc	rent muce of the Execution a list arate inserage medical lines deduction all of the popy line appy line ap	Total amount of all past-of monthly Chapter 13 plan ultiplier for your district as ne United States Courts (for tive Office for United State to f district multipliers that inclustructions for this form. This list monthly administrative expenses a sale when the allowed deductions for the allowed deductions a allowances.	ch as those you listed in lindue priority claims  n payment stated on the list issued by or districts in Alabama and I is Trustees (for all other distudes your district, go online using the may also be available at the bense  of payment.  Illowed under IRS	the Administrativ North Carolina) o tricts).  ng the link specified pankruptcy clerk's o	ve or by d in the office.	\$ X \$	Copy t	otal > \$	

Debtor 1

Debtor	1 <u>Jol</u>	nn Brian I	Bergeron		-	Case r	number (if known)	19-50	0859
Part 2	2: D	etermine You	r Disposable Income Under 1	1 U.S.C. § 1325(l	o)(2)				
39.			ent monthly income from line Current Monthly Income and C					\$	9,539.46
40.	childre disabilit receive	<ul> <li>The monthly payments for discourage</li> <li>d in accordance</li> </ul>	ly necessary income you rece y average of any child support or a dependent child, reported in the with applicable nonbankruptor anded for such child.	payments, foster of Part I of Form 12	care payments, 22C-1, that you	or	\$	0.00	
41.	employe in 11 U.	er withheld fro S.C. § 541(b)	etirement deductions. The moment wages as contributions for queron plus all required repayments § 362(b)(19).	ualified retirement	plans, as spec	cified	\$	0.00	
42.	Total of	all deductio	ns allowed under 11 U.S.C. §	<b>707(b)(2)(A).</b> Cop	y line 38 here	=>	<b>\$</b> 6,3	96.60	-
43.	expense their ex	es and you ha penses. You r	al circumstances. If special cilute no reasonable alternative, do not give your case trustee a documentation for the expenses.	escribe the specia	al circumstance				
Des	scribe tl	ne special cir	cumstances		Amount of	expens	se		
					\$				
					\$				
					\$				
				Total \$_	0.0		Copy here=>\$	(	0.00
44.	Total a	djustments. /	Add lines 40 through 43		=>	<b>&gt;</b> \$_	6,396.6	O her	py re=> -\$ 6,396.60
45.	Calcula	ite your mon	thly disposable income under	· § 1325(b)(2). Su	btract line 44 fr	om line	<del>2</del> 39.		\$3,142.86
Part 3	3: C	hange in Inco	ome or Expenses						
46.	reported your ba below. I 122C-1	d in this form hankruptcy petition example, in the first col	or expenses. If the income in Formative changed or are virtually contained and during the time your case of the wages reported increased umn, enter line 2 in the second the increase occurred, and fill	ertain to change at se will be open, fil after you filed you column, explain w	fter the date yo I in the informa ur petition, che why the wages	u filed tion			
For	m	Line	Reason for change		Date of ch	ange	Increase or decrease?	A	mount of change
	122C-1 122C-2 122C-1 122C-2 122C-1 122C-2 122C-1 122C-2						☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Decrease ☐ Decrease ☐ Decrease	<ul><li>\$</li><li>\$</li><li>\$</li></ul>	

## 19-50859-KMS Dkt 14 Filed 06/03/19 Entered 06/03/19 15:36:48 Page 46 of 51

Debtor 1 John Brian Bergeron Case number (if known) 19-50859

Part 4: Sign Below

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

**X** /s/ John Brian Bergeron

John Brian Bergeron Signature of Debtor 1

Date June 3, 2019

MM / DD / YYYY

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	<u>\$75</u>	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Southern District of Mississippi

In re	John Brian Bergeron		Case N	No. 1	9-50859	
		Debtor(s)	Chapte		3	
	DISCLOSURE OF COMPE	NSATION OF ATTOR	NEY FOR	DEBT	OR(S)	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be p	oaid to me	e, for services rer	ndered or to
	For legal services, I have agreed to accept		\$	3,	600.00	
	Prior to the filing of this statement I have received		\$	1,	000.00	
	Balance Due			2,	600.00	
2.	The source of the compensation paid to me was:					
	■ Debtor □ Other (specify):					
3.	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person t	inless they are n	nembers a	and associates of	my law firm.
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the nar					w firm. A
5.	In return for the above-disclosed fee, I have agreed to re	nder legal service for all aspects	of the bankrupt	cy case, i	ncluding:	
l	a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credited. [Other provisions as needed]  Negotiations with secured credit preparation and filing of reaffice.	ement of affairs and plan which ors and confirmation hearing, and cors to reduce to mark irmation agreements an	may be required d any adjourned et value; d applicati	; hearings exempti	thereof; on planning needed; pr	; eparation
	<pre>and filing of motions pursuant t goods.</pre>	to 11 USC 522(f)(2)(A)	for avoida	ince of	liens on h	ousehold
5. l	By agreement with the debtor(s), the above-disclosed fea Representation of the debtors in relief from stay actions or any	n any dischargeability	actions, j	udicia	al lien avoi	dances,
		CERTIFICATION				
	I certify that the foregoing is a complete statement of any ankruptcy proceeding.	y agreement or arrangement for	payment to me f	or repres	entation of the de	btor(s) in
J <sup>.</sup>	une 3, 2019	/s/ Christophe	r G. Holt			
$\overline{D}$	Pate	Christopher G.				
		Signature of Attorney Christopher G. 2501 14th Stre Gulfport, MS 3	Holt Attor et, Suite 2		Law, PLLC	
		228-865-7646 F	ax: 228-868	-5475		
		cgerardholt@gm	ail.com			
		Name of law firm				